KING COUNTY MENTAL HEALTH ADVISORY BOARD AND KING COUNTY ALCOHOLISM AND SUBSTANCE ABUSE ADMINISTRATIVE BOARD

JOINT BOARD MEETING

APRIL 15, 2004

EXCHANGE BUILDING, CONFERENCE ROOM 6A

<u>KCMHAB Members Present:</u> Michael Haan (awaiting County Council confirmation), Melody Cecilia James (awaiting County Council confirmation), Howard Miller, Helen Nilon, Eleanor Owen, Ron Sterling

<u>KCHMAB Members Absent:</u> Shauna Cheney (unexcused), Joshua Freed (unexcused-awaiting County Council confirmation), Jack Fuller (unexcused), Jim Nobles (excused), Clifford Thurston (unexcused), Gwendolyn Williams (excused)

<u>KCASAAB Members Present:</u> Linda Brown, Joan Clement, Nancy Code, Roger Goodman, Larry Hill, Mary Alice Knotts (awaiting County Executive appointment), Kim Murillo, Yasmin Smith

KCASAAB Members Absent: Pam Detrick (excused), Jim Harbaugh (excused)

<u>Guests Attending:</u> Jan Berkedal, Central Youth and Family Services; Trish Blanchard, Seattle Mental Health; Paul Conner, Fetal Alcohol and Drug Unit, University of Washington; Ann Forbes, Juanessa Scott, Alcohol Drug Hotline; Sandy Hansen, NAMI Eastside; George Parker, Therapeutic Health Services; Livia Petzold, Suzanne Wietting Fairfax Hospital; Susan Schoeld, Ruth Dykeman Youth and Family Services; Pamela Pratt, private citizen

<u>Staff Attending:</u> Steve Collins, Liz Gilbert, Jackie MacLean, Rhoda Naguit, Jim Vollendroff

The joint meeting of the King County Mental Health Advisory Board and the King County Alcoholism and Substance Abuse Administrative Board was held on Thursday, April 15, 2004 at the Exchange Building, Conference Room 6A. KCASAAB Chair Linda Brown convened the meeting at 12:03 p.m.

I. WELCOME AND INTRODUCTION

KCASAAB Chair Linda Brown welcomed members from both boards and all the guests. Everyone was asked to introduce him/herself.

II. POWERPOINT PRESENTATION ON FETAL ALCOHOL SYNDROME

Linda Brown introduced Dr. Paul Conner from the University of Washington Fetal Alcohol and Drug Unit before he made his presentation on fetal alcohol syndrome (FAS). Dr. Conner provided the following **handouts:** Neuropsychological Deficits in

Adult Males with Heavy Fetal Alcohol Exposure; Direct and Indirect Effects of Prenatal Alcohol Damage on Executive Function; A 21-year Longitudinal Analysis of the Effects of Prenatal Alcohol Exposure on Young Adult Drinking; Effects of Prenatal Exposure to Alcohol Across the Life Span; Understanding the Occurrence of Secondary Disabilities in Clients with Fetal Alcohol Syndrome (FAS) and Fetal Alcohol Effects (FAE), Final Report, August 1996.

Highlights of his presentation include:

- Fetal Alcohol Syndrome has been studied 1973.
- Alcohol is a teratogenic drug that when taken by a pregnant woman can cause death, malformation, growth deficiency and functional deficits to the infant. The effect of alcohol use is more acute during the first trimester of pregnancy.
- Symptoms of central nervous system dysfunction related to FAX include hyperactivity, attentional deficits, intellectual deficits, learning disorders, problems with memory, language and judgment, developmental delays, fine or gross motor problems, mental retardation and seizure disorder. Symptoms vary depending on the amount of alcohol use..
- Individuals with FAS have very distinctive facial features and other physical characteristics.
- Dropping out of school and problems with the legal system are common among individuals with FAS.
- Important strategies when working with individuals include: Consistency, Clear information about expectations and rules and the consequences of behavior, helping the individual develop a "memory book" and contingency plans.
 Instructions to a person with FAS should be concrete, specific and written.

Refer to handouts for more detailed information on FAS or visit the program website at: http://depts.washington.edu/fadu/

III. UPDATE FROM MENTAL HEALTH ADVISORY BOARD

KCMHAB Chair Howard Miller reported on four areas of board concentration during the past year:

- Board membership: Recruitment of new members has been and continues to be a
 priority, particularly since five active members have retired or resigned. Board
 membership currently includes nine confirmed members, three nominees, and three
 applicants. Present officers finish their term on June 30, at which time a new chair
 and vice chair will take over. Election of new officers will take place at the June
 board meeting.
- **Board Committees**: The three standing committees of the Board have been busy honoring their missions.

- Legislative advocacy: Board members serving on the Legislative Advocacy and Public Affairs Committee again collaborated with members from the Alcoholism and Substance Abuse Board to strengthen communications with members of the legislature throughout the year, culminating in the sixth annual Legislative Forum held last November. Throughout the 2004 session, the parity bill was a top priority, and for the first time this bill passed in the state House of Representatives.
- Quality Council: The Quality Council continues to reach out and draw participation from the community. In cooperation with local NAMI organizations, outreach has been expanded to include the holding public community forums with the goal of eliciting feedback on priority issues facing the King County mental health care system. So far the results have been cooperative and positive. The initial forum was held in March in cooperation with NAMI-Greater Seattle, with a large turnout by the community. A similar forum will be held on April 20 with NAMI-South King County at the Valley Cities Counseling and Consultation Center in Auburn. It is hoped that NAMI-Eastside will choose to participate in a third forum to be held in the Bellevue area in May.

QC Chair Ron Sterling has produced a brochure for general circulation that describes the role and work of the Quality Council. In this publication, priority issues and concerns are identified, including case manager workload and turnover and the reduction of services to non-Medicaid clients.

Recovery Initiatives: The MHAB has launched a new standing committee, the
Recovery Initiatives Committee, chaired by Eleanor Owen. The committee's mission
is to make recommendations to the board concerning the county's Recovery
Ordinance and supported housing and work initiatives. The committee held its first
meeting in March and is actively seeking additional members.

IV. UPDATE FROM SUBSTANCE ABUSE BOARD

Linda highlighted the board's activities and accomplishments:

- <u>Legislative Forum:</u> The board continues to partner with King County Mental Health Board in the annual Joint Legislative Forum to strengthen the legislative advocacy efforts of both boards.
- <u>Title XIX Funding:</u> During the fall Board retreat fiscal experts from DASA provided an educational session for the Board on Title 19 funding for substance abuse services in Washington. The Board found this very useful to their goal of further understanding of the complex issues related to funding for substance abuse services.
- Board Liaison Activities: Members of the Board serve as liaisons to a number of other Boards and Committees in the County. This is done in an effort to increase Board awareness of other work going on in the County and to inform other Boards about substance abuse services and issues.

- <u>Task Force Related to Shortage of Chemical Dependency Professionals:</u>
 Recognizing the problem of shortage of qualified chemical dependency professionals, the board created a Task Force to address the issue. Kim Murillo is chairing the Task Force.
- Integration of Prevention and Treatment Programs in King County: The board continues to pursue closer integration of prevention and treatment programs in the County.
- <u>Developing Relationships with County Council</u>: The Board is working to develop to a stronger relationship with County Council. This is especially important since there is a new chair of the Law, Justice and Human Services Committee with whom the Board has not worked.
- <u>Criminal Justice and Chemical Dependency:</u> The board continues to focus on the ongoing programs linking chemical dependency services with the County jail and other justice programs..

V. DISCUSSION OF LEGISLATIVE ACTIVITIES

Roger Goodman as chair of the joint Legislative and Advocacy Committee provided an update on legislative actions impacting chemical dependency and mental health services.

On the chemical dependency side the passage of SB 6011, a comprehensive antihunger measure that opts Washington out of the federal ban on food stamp eligibility for prior drug offenders was very important. Washington is now one of only 12 states to have completely opted out of the food stamp ban. HB 2014 also passed, which prevents insurers from denying coverage for patients who incurred injuries related to drug/alcohol.

Unfortunately, due to passage of an insurance bill, small employers can now offer employee insurance policies that don't cover substance abuse or mental health treatment. This is a barrier to treatment.

Also unfortunate, the bill that would have allowed individuals to purchase medication from Canada did not pass. The impact of this bill is especially negative for individuals on psychotropic medication.

Roger described the restructuring of the Legislative Advocacy and Public Affairs Committee that was done to re-energize the participation of the members of the King County Mental Health Board (KCMAB) and the King County Alcoholism and Substance Abuse Administrative Board (KCASAAB). Under the new structure, there will be a single board chair, who is a member of either board, and community representation will be encouraged. KCASAAB member, Roger Goodman, is currently the committee chair. The committee will continue to gather information for the two boards, analyze and make recommendations to board on legislative and

public policy issues, encourage communication between the committee and the boards and serve as an advocate for the board during the legislative session.

Linda Brown reminded the two boards that now is the best time to be thinking of the legislative issues to be included in the Legislative Forum while the legislature is not in session.

VI. OTHER CONCERNS

Melody Cecilia James brought up the issue of discontinued health insurance coverage for University of Washington students for treatment of ADHD. This included both drug benefits and therapy and took effect the first of the year. Due to time constraint, this issue was tabled for future discussion.

There being no further business, the meeting was adjourned at 1:45 p.m.

Prepared by:

Rhoda A. Naguit
Recording Secretary

Attested by:

Linda Brown
Board Chair